SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATE MENT AND FEE TO: Bayriel # punty Planning nd Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Owner(s): (If there are Multiple Owners listed or

Authorized Agent:

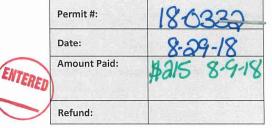
INSTRUCTIONS: No permits will be issued until all fees are paid Checks are made payable to: Bayfield County Zoning Department.

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN





Bayfield Co. Zoning Dept.



FILL OUT IN INK (NO PENCIL)

DO NOT START CONSTRUCTIO	N UNTIL A	LL PERMITS H	AVE BEEN ISSUE	ТО АРР	LICANT.				FILL OU	IN IN	K (<mark>NO PE</mark>	NCIL)	
TYPE OF PERMIT REQUES	TED→	10 LAND	USE SA	NITAR		□ COND			□ SPECIAL	USE	□ в.о.		THER
Owner's Name:	١.,			1.	ng Address:	.L. C.		tate/Zip:		. 1	~	Telephon	
Address of Property:	latt	San		- 650	OT N.34	41m2t		upe	na W	11 3	54 <u>80</u>	Cell Phon	395-1833 e:
67210 W.Cn	1sto	J LK	Rd	Iro	n River	WI	51	184	1				128-8416
Contractor:	J			Contr	actor Phone:	Plumber						Plumber	Phone:
Authorized Agent: (Person Sig	ning Applic	ation on behalf	of Owner(s))	Agen	t Phone:		ailing Add	ress (incl	ude City/State	/Zip):			Authorization
NIA													□ No
PROJECT LOCATION Legal	Descript	ion: (Use Ta	x Statement)	Tax II	1847	3				Reco	rded Docu 2	ument: (Sho	wing Ownership)
1/4,	1/4	Gov't Lot	Lot(s)	CSM		CSM Doc#	Lot(s)	No.	Block(s) No.	Subd	ivision:		
Section 15, Tow	nship	47 N, Ra	ange 9	w	Town of:			·		Lot S	ize	Acrea	Z0
			300 feet of Ri	-	eam (incl. Intermitted	nt) Dista	nce Struc	ture is f	rom Shorelin	e : feet		perty in	Are Wetlands
Shoreland >			1000 feet of l	ake, Poi		Dista	nce Struc	ture is f	rom Shorelin			ain Zone? Yes No	Present? ☐ Yes MNo
☐ Non-Shoreland				,								- E	
Value at Time	The Paris			1.117		E.			17.7	7) " T			
of Completion						bedi	of			nat Ty			Type of Water
* include donated time &	Proje	ct	# of Stor	ies	Foundation		in				ry Syster	m	on
material			V 4.61				cture		-1-11/Cit-				property
	w Const	Iteration		⊦ Loft	☐ Basement	_		10.00	nicipal/City w) Sanitary		ify Type:		☐ City
S (2 A A	nversion		2-Story	. 2010	¥ SIAb	3		Sanitary (Exists) Specify Type:					
Rel	ocate (e:	xisting bldg)			(This I ha	<i>h</i>		□ Privy (Pit) or □ Vaulted (min 200 gallon)					
	n a Busii	ness on			Use	× N	lone		table (w/ser		ntract)		
	perty	Pba		_	Year Roui	nd		☐ Cor	npost Toilet	t			
	3001Fr							i NOI	ie				
Existing Structure: (if pe		ng applied fo	r is relevant to	it)	Length:	17		Width: Width:		n .		eight: eight:	13
Proposed Construction:					Length:	16		wiatii	, ,			eignt:	
Proposed Use	1				Proposed Stru	cture				C	Dimensio	ons	Square Footage
					cture on proper	ty)				(X)	
		Residence	e (i.e. cabin, l with Loft	nunting	shack, etc.)					(X)	
Residential Use			with a Por	ch						(X)	
/ `			with (2 nd)							(Х)	
			with a Dec	k						(Х) _	
			with (2 nd)	Deck	+					(χX)	
☐ Commercial Use			with Attac							(Х)	
					☐ sleeping quart					(Х)	
					ate)					(X)	
☐ Municipal Use					<i>-</i>					1	X)	
					Alteration (see					1	X)	
		Accessor	y building Ad	aition/	Alteration (spe	:city)				1	^	,	
		Special U	se: (explain) _							(Х)	-
			nal Use: (expla	ain)						(Х)	
	X	Other: (ex	- / 1	aze	60, Ba	my h	2010	- 81	Dirath	-()	2 x 1	21	120
	10				RTING CONSTRUCTI								200 1
I (we) declare that this application (are) responsible for the detail an result of Bayfield County relying property at any reasonable time for	(including a					il	/	dee end be	It of the to have a second		omplete. I (v I (we) furthe	we) acknowle r accept liabili	dge that I (we) am ty which may be a
			The state of the s	a contain a later	the second of the second	the second second		second model of	from the second second second	tu ordina		and the second second second section	and the second second

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Address to send permit ________ superior **Copy of Tax Statement**

Date

the Deed All Owners must sign or letter(s) of authorization must accompany this application)

aw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL **Show Location of: Proposed Construction** Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6) Show any (*): Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)water Driveno

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Measurem	nent		Description	Measurem	ent		
	9		X.				
175	Feet		Setback from the Lake (ordinary high-water mark)	45	Feet		
175	Feet		Setback from the River, Stream, Creek	186			
10			Setback from the Bank or Bluff		Feet		
170	Feet						
513	Feet		Setback from Wetland	_	Feet		
816	Feet		20% Slope Area on the property	☐ Yes	₽Nο		
45	Feet		Elevation of Floodplain		Feet		
2.50	Feet		Setback to Well	180	Feet		
250	Feet			, 0			
_	Feet						
	175 /75 /76 513 814 45	/75 Feet /70 Feet 513 Feet 910 Feet 45 Feet 250 Feet	175 Feet	Feet Setback from the Lake (ordinary high-water mark) / 35 Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff / 40 Feet Setback from Wetland 513 Feet Setback from Wetland 914 Feet 20% Slope Area on the property 45 Feet Elevation of Floodplain 250 Feet Setback to Well 250 Feet	175 Feet Setback from the Lake (ordinary high-water mark) 175 175 Feet Setback from the River, Stream, Creek 186 1		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit#: 18-0338	Permit Date: 8-2	9-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue) Yes (Deed of Record Yes Yes (Deed of Record Yes Yes (Deed of Record Yes Yes Yes (Deed of Record Yes Yes	ous Lot(s)) No	Mitigation Required Mitigation Attached	Affidavit Required	
Granted by Variance (B.O.A.) ☐ Yes → No Case #:		Previously Granted b		e#: NA
Was Parcel Legally Created Was Proposed Building Site Delineated ▶ Yes □ No			es Represented by Owner Was Property Surveyed	
Inspection Record: Replacing Nonconformitisation per State Sta	rming Screen		LU permit.	Zoning District (RPD Lakes Classification (2)
Date of Inspection: 8/22/18	Inspected by:	but Sul	ulerman	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attac	hed?	No they need to be atta	ached.)	
Not to be used	for Hum	en Heblt.	-400m.	
21A/	\mathcal{A}			
Signature of Inspector:	1			Date of Approval: 8 28 8
Hold For Sanitary: Hold For TBA:	Hold For Affic	lavit: 🗌	Hold For Fees:	

Village, State or Federal May Also Be Required

OUSE - X ANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-	0332	2		Issued	d To: Cla	arenc	e & Sherry	Matts	on				
Location:		1/4	of	-	1/4	Section	15	Township	47	N.	Range	9 W.	Town of	Hughes
2 Pars in Gov't Lot	3			Lot	٠	Blo	ock	Su	bdivisi	on			CSM#	

For: Residential Accessory Structure: [1- Story; Gazebo (12' x 12') = 144 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Not to be used for human habitation.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

August 29, 2018

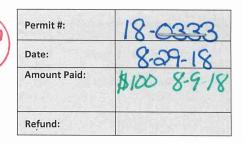
SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FRETO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

AUG 08 2018

Bayfield Co. Zoning Dept.



INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT

FILL OUT IN INK (NO PENCIL)

TYPE OF PERMIT R	REQUESTED—	►	D USE SANI	THE COURT OF THE C	□ CONDITION	NAL USE SPECIAL	USE 🗆 B.O	.A. 🗆 C	OTHER
Owner's Name:			1	Mailing Address:	Ci	ty/State/Zip:		Telephon	
Sherry Address of Property:	matte	500		1427 N 34. City/State/Zip:	+1 St. S	office w			-395-18
								Cell Phon	ne:
67210 L	s cryst	al lake	RD	Contractor Phone:	V WJ	54847		218	478-841
Contractor:	X			Contractor Phone:	Plumber:	~		Plumber	
Authorized Agent: (Person Signing And	olication on behal	If of Owner(s))	Agent Phone:	Agent Mailing	Address (include City/State	/7in\•	Written /	Authorization
,	X			gene . mone.	Agent Maning	ridaress (merade enty/state	/ Lip)•	Attached	
	1			Tax ID#			Recorded Doc	☐ Yes	□ No Dwing Ownership)
PROJECT LOCATION	Legal Descr	ption: (Use T		1847	í		1127		158
		Gov't Lot	Lot(s) CS			ot(s) No. Block(s) No.	Subdivision:		
1/4,	1/4	3		11279					
1-		112	<u> </u>	Town of:			Lot Size	Acrea	ge
Section 15	, Township	<u> </u>	ange W	<u> </u>	ushes				20
	☐ In Duaman	to . /1 a m al	- 200 foot of Diver	Standard (c. 1)	Distance Co				
	Creek or La		n 300 feet of River of Floodplain?	, Stream (incl. Intermitte If yescontinue —		tructure is from Shorelin	is Pro	perty in lain Zone?	Are Wetlands Present?
☐ Shoreland →	✓ Is Proper	ty/Land withi	n 1000 feet of Lake	e, Pond or Flowage	Distance St	tructure is from Shorelin		Yes	☐ Yes
		**		If yescontinue —	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	M	To make	No	≫No
☐ Non-Shoreland									
Value at Time of Completion					# of	W	nat Type of		Type of
* include	Pro	ect	# of Stories	Foundation	bedroom	9	Sanitary Syste	m	Water
donated time &					in structure	Is on t	the property?		property
material	☐ New Con	struction		☐ Basement		☐ Municipal/City			
	☐ Addition		☐ 1-Story + Lo			☐ (New) Sanitary	Specify Type:		☐ City > Well
\$ 500 00	☐ Conversi		☐ 2-Story	¥ Po 5+3	□ 3	Sanitary (Exists		***	
	☐ Relocate	(existing bldg)				☐ Privy (Pit) or			
	🗆 Run a Bu	siness on		Use	→ None	☐ Portable (w/ser	vice contract)		
	Property			Year Roui	nd	☐ Compost Toilet			
	y Stair	to LAKE	4			☐ None			
					_				
Existing Structure	e: (if permit be	eing applied fo	or is relevant to it)	Length:		Width:	Н	eight:	
Existing Structure Proposed Constru		eing applied fo	or is relevant to it)		40			leight:	12"
Proposed Constru	uction:	eing applied fo	or is relevant to it)	Length:	TO THE WAY	Width:	H	leight:	12
	uction:	eing applied fo	or is relevant to it)		TO THE WAY	Width:		leight:	/2" Square Footage
Proposed Constru	se ✓	Principal	Structure (first s	Length: Proposed Strustructure on proper	cture	Width:	H	leight:	Square
Proposed Constru	uction:	Principal	Structure (first s	Length: Proposed Strustructure on proper	cture	Width:	Dimensio	leight:	Square
Proposed Us	se ✓	Principal	Structure (first s e (i.e. cabin, hun with Loft	Length: Proposed Strustructure on proper	cture	Width:	Dimensio	leight:	Square
Proposed Constru	se ✓	Principal	Structure (first s e (i.e. cabin, hun with Loft with a Porch	Proposed Strustructure on proper ting shack, etc.)	cture	Width:	Dimensio	leight:	Square
Proposed Us	se ✓	Principal	Structure (first s e (i.e. cabin, hun with Loft	Proposed Strustructure on proper ting shack, etc.)	cture	Width:	Dimension (X (X (X (X (X (X (X (X (X (leight:	Square
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Proposed Construction Proposed Us Residential Commercial I (we) declare that this a (are) responsible for the result of Bayfield County property at any reasonate Commer(s): (If there are Multi-Authorized Agent	Use Use Use Use Use Use Use Use	Bunkhou Mobile H Addition Accessor Special U Condition Other: (e	Structure (first set in the content of the content	Proposed Strusture on proper ting shack, etc.) rch ck d Garage , or □ sleeping quarted date) cify)	ers, or cooking cify) DN WITHOUT A PER the best of my (our) kn the by Bayfield County ir ent to county officials Zation must accommust accommust accompany t	width: Width: Width: Graph and the second	Dimension (Dons)))))))))))))) we) acknowled r accept liability e access to the	Square Footage Footage Ige that I (we) am y which may be a above described

or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink - NO PENCIL

how Location of:

Proposed Construction

Show / Indicate: Show Location of (*): North (N) on Plot Plan

Show:

(5)

(7)

(*) Driveway and (*) Frontage Road (Name Frontage Road)

Show:

All Existing Structures on your Property

Show any (*): (6) Show any (*): (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20%

Ser Attached map

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	ent	Description	Measur	ement
Setback from the Centerline of Platted Road	175	Feet	Setback from the Lake (ordinary high-water mark)	Ø	Feet
Setback from the Established Right-of-Way	175	Feet	Setback from the River, Stream, Creek	180	Feet
			Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	170	Feet			
Setback from the South Lot Line	513	Feet	Setback from Wetland		Feet
Setback from the West Lot Line	826	Feet	20% Slope Area on the property	☐ Yes	≫ No
Setback from the East Lot Line	p	Feet	Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	260	Feet	Setback to Well	190	Feet
Setback to Drain Field	260	Feet		. , ,	
Setback to Privy (Portable, Composting)		Feet			

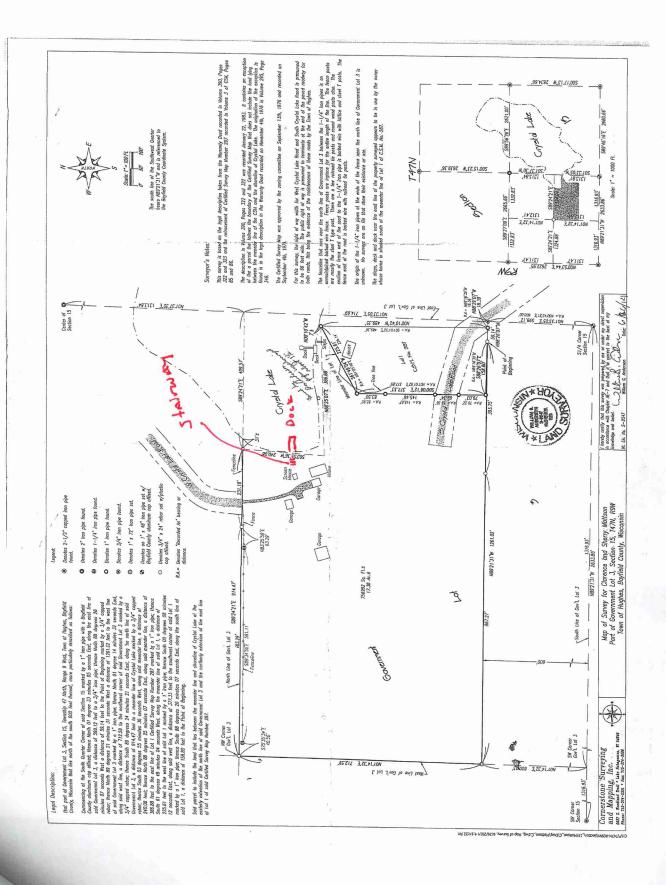
other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit#: 18-0333	Permit Date: 8-2	7-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes (Fused/Contigue) Yes Yes	ous Lot(s))	Mitigation Required Mitigation Attached	Affidavit Required ☐ Yes No Affidavit Attached ☐ Yes No	
Granted by Variance (B.O.A.) ☐ Yes No Case #:	A	Previously Granted by Yes No	y Variance (B.O.A.) Case	#: NA
Was Parcel Legally Created Was Proposed Building Site Delineated Wes □ No Ves □ No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes Allached No
Inspection Record: Mac 15 Code 1	equiremen	to oh.	to issue Remit.	Zoning District (RRIS) Lakes Classification (2)
Date of Inspection: 8 22 / 2018	Inspected by:	ut Schir	rman	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Attac				
Must Not Excee	0 60" ;	~ widt	h	
2/1/0				
Signature of Inspector:				Date of Approval: 8/28/18
Hold For Sanitary: 🗆 Hold For TBA: 🗆 _	Hold For Affid	lavit: 🔲	Hold For Fees: 🗌	_ 0



Village, State or Federal May Also Be Required

ND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-	0333			Issued	d To: Cla	arenc	e & Sherry	Matts	on						**************************************
Location:		1/4	of	_	1/4	Section	15	Township	47	N.	Range	9	W.	Town of	Hughes	
2 Pars in Gov't Lot	3		ı	_ot		Blo	ck	Sul	bdivisio	on				CSM#		

For: Residential Accessory Structure: [Stairs to the Lake (4' x 40') = 160 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must not exceed 60" in width.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

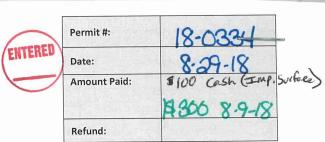
August 29, 2018

SUBMIT: COMPLETED APPLICATION, TAX Bayfield County

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN





INSTRUCTIONS: No per Checks are made payab DO NOT START CONST	ble to: Bay	rfield Cou UNTIL ALI	PERMITS HA	VE BEEN ISSUE	TO APPLI	ICANT.				FILL OUT	IN INK	(NO PENC	IL)		
TYPE OF PERMIT RE			★ LAND		NITARY		CONDI	TIONAL	USE 🗆	SPECIAL U	JSE	☐ B.O.A.	□ 0 .	THER	
Owner's Name:	QUESTE		F LAND	USL 1 JA		g Address:		_	state/Zip:			Te	lephone	:	-1015
Glasson.	000	110	00		160	7 1 74	th SI	Sup	erior	WI S	(Ran)	7	15-3	95	-1852
Sherry Address of Property: 67210 W	1010	CTI	5071		City/St	7 N 34 tate/Zip:	. 51.			0	1000	,Ce	ell Phone		
Carrio Ca	6.00		. 1-1-									76	213.	423	8416
Contractor:) Cr	y 5 fa	laca	RD	Contra	actor Phone:	Plumber:	0 /0	7 (umber P		
Contractor.								X							
Authorized Agent: (Pe	erson Signi	ng Applica	tion on behalf	of Owner(s))	Agent	Phone:	Agent Ma	iling Ado	Iress (includ	de City/State/	Zip):	1	/ritten A	uthori	ation
×				V.									ttached Yes [□ No	
THE PERSON NAMED IN COLUMN					Tax ID	<u>)#</u>						ded Docume			
PROJECT LOCATION	Legal D	escripti	on: (Use Ta	x Statement)	1	18473					-11	17		58	
			Gov't Lot	Lot(s)	CSM	Vol & Page C	SM Doc#	Lot(s) No. B	lock(s) No.	Subdi	vision:			
1/4,	1/	4	3			1127 P.	158								
_				9		Town of:					Lot Si	ze	Acreag	e	
Section 15	_ , Town	ship	N, Ra	inge	W	H	4	5						2	5
										Chaualin					
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	// Is Pi	roperty/	Land Within	TOOU TEET OF		escontinue —	1	ice stru	45		eet	MI	0	1	√ No
☐ Non-Shoreland															
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of Completion							bedr	ooms	110		at Typ				Water
* include		Projec	t	# of Sto	ries	Foundation	i	n				ry System operty?			on
donated time & material							stru	cture		13 011	inc pri	орстту.	, P		property
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	☐ Add	ition/A	lteration	☐ 1-Story	+ Loft	☐ Foundatio	n 🗆 2		□ (Nev	w) Sanitary	Speci	ify Type:			> Well
\$ 3,000.00	☐ Con	version		☐ 2-Story		× Gravel	_ 3		Sani	tary (Exists) Spec	ify Type: 🧾	> +		
	☐ Relo	cate (ex	isting bldg)							y (Pit) or			200 gallo	n)	
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Proposed Construction Proposed Use Residential Commercia I (we) declare that this (are) responsible for the result of Bayfield Couproperty at any reason Owner(s): (If there are Multiple Couproperty and Couproperty at any reason Owner(s):	e: (if per uction: se Use Use application de detail and thy relying o able time for the little own the littl	(including a accuracy on this inform the purpowers listed	Bunkhou Mobile H Addition Accessor Special U Conditio Other: (c	Structure (for the (i.e. cabin, with Loft with a Powith (2nd) with a Dewith (2nd) with Attainse w/ (san Home (manufal) Alteration by Building And Use: (explain) san I (we) am (are) providing in the cabin and the	first struct hunting hunting prch) Porch eck) Deck ached Galitary, or lactured dy lactured dy lactured dy lactured dy lactured	Length: Length: Length: Cture on proper shack, etc.) arage Sleeping quart date) /Alteration (specific construction of the co	cture ters, or cify) Con Without the best of my on by Bayfield disent to county rization must according to must according to must according to the county of the county	JT A PERM (our) know County in y officials of st accom	Width: Width: Width: & food pre	p facilities) p facilities) SULT IN PENAI lief it is true, con rhether to issue a dministering cou	(((((((((((((((((((Heigonemions X X X X X X X X X X X X X	s))))))))))))))))))	For a state of the	t I (we) am n may be a described

w: Draw or Sketch your Property (regardless of what you are applying for)

Fill Out in Ink – NO PENCIL

Show / Indicate:

Proposed Construction North (N) on Plot Plan

(2) Show Location of (*): (3)

(*) Driveway and (*) Frontage Road (Name Frontage Road)

(4)

Show: All Existing Structures on your Property

(5) Show: Show any (*): (6)

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See Attached Map

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	ent		Description	Measur	ement
Setback from the Centerline of Platted Road	195	Feet		Setback from the Lake (ordinary high-water mark)	10	Feet
Setback from the Established Right-of-Way	195	Feet		Setback from the River, Stream, Creek	15'	Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	200	Feet				
Setback from the South Lot Line	495	Feet		Setback from Wetland		Feet
Setback from the West Lot Line	835	Feet		20% Slope Area on the property	☐ Yes	≫ No
Setback from the East Lot Line	10'	Feet		Elevation of Floodplain	_	Feet
Setback to Septic Tank or Holding Tank	200	Feet		Setback to Well	7.8	n Feet
Setback to Drain Field	2 G 0	Feet				
Setback to Privy (Portable, Composting)		Feet				
Prior to the placement or construction of a structure within ten (10) fe-	et of the minimum require	ed setback t	he bo	oundary line from which the setback must be measured must be visible from one	previously suprey	ad corpor to the

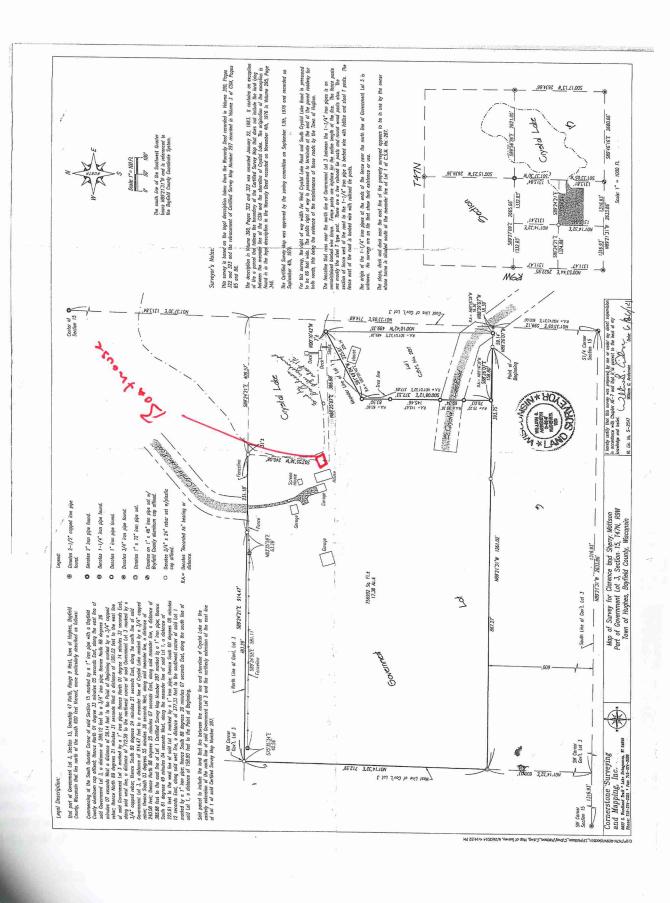
other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 18-0334	Permit Date: 8-29	-18		
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Rec Yes (Fused/Conti	guous Lot(s)) No	Mitigation Required Mitigation Attached		Affidavit Required
Granted by Variance (B.O.A.) Yes No Case #: A		Previously Granted b	oy Variance (B.O.A.)	e#: \\A
Was Parcel Legally Created Was Proposed Building Site Delineated ▼Yes □ N Yes □ N	0	Were Property Lin	es Represented by Owner Was Property Surveyed	
Inspection Record: Code Complian	t Location	N		Zoning District (RRIA Lakes Classification (Z)
Date of Inspection: 8 22 2018			wwar	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions At				
Shell only be uso	d for Stor	ing Bon	its, Bont	INS : Beach Equipmen
Note to be used f	or hyper	habil to	.t 10n.	
Signature of Inspector:	400			Date of Approval: 8 Z 8 Zol
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:	



City, Village, State or Federal May Also Be Required

AND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	18-0	0334			Issued	To: CI	arenc	e & Sherry	Matts	on					
Location:	_	1/4	of	-	1/4	Section	15	Township	47	N.	Range	9	W.	Town of	Hughes
2 Pars in Gov't Lot	3		l	_ot		Blo	ock	Su	bdivisi	on	_			CSM#	

For: Residential Accessory Structure: [1 – Story; Boathouse (12' x 16') = 200 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Shall only be used for storing boats, boating and beach equipment. Not to be used for human habitation.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

August 29, 2018

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR SIGN
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

AUG 2 2 2018

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONST	RUCTIO	N UNTIL ALL PERMITS HAVE BEE	N ISSUED TO	O APPLICANT.							
Property Owner(s)	Name:	- 1 1		Mailing Address:	City	/State/Zip;	Phone:	Phone:			
Across	The	. Pond Veter	ANS	POBOX 31	耳	State/Zip:	M	N/A			
		Inc		1000001		548			///		
Sign Owner(s) Name	e:			Mailing Address:	City	/State/Zip:		Phone:	,		
(Sh	ME	>						N	/A		
Address of Property		/		City/State/Zip:							
					ver_	WITS	4847	7			
Contractor:		,		Contractor Phone:	Address: // -	120 Co.	Hin	B:			
1 m /	k	CONCOC		372-4373	Iran	River	1174	5484	7		
Authorized Agent:	(Person S	Signing Application on behalf of Ov	vner(s))	Agent Phone:	Agent Mailing A	Address (include City	/State/Zjp):	Written Au	uthorization		
					67815	Shady	CAKL	Attached			
vanec	<u> </u>	nilsberg, Ta	CAS	13/2-82021.	Iron	River, L	UI 54	947 X Yes	NO		
		٧		Tourist (4 out of district			D		atu o Ou un a aala im l		
PROJECT	Leg	al Description: (Use Tax Sta	tement)	Tax ID: (4 or 5 digits)			Recorded Document: (i.e. Property Owne				
LOCATION					Telephone I .		Volume Page(s)				
NW 1/4,	SE	Gov't Lot	Lot(s) CSM Vol & Page	Lot(s) No.	Block(s) No.	Subdivision	:			
			/	2019 V.12 32	7/ No.						
Saction /	2	, Township <u>47</u> N, Ran	9	10001101.	1		Lot Size	Acreage	_		
Section _/	<u>a</u>	, rownship N, Kan	ge	-" Hug	hes	*	v		0		
		s Property/Land within 300	feet of Riv	er Stream (incl Intermittent)	Distance Str	ructure is from Sh	orolino :		Are		
	(49)	eek or Landward side of Floo		If yescontinue	Distance 3ti	67		Is Property in Floodplain Zone?	Wetlands		
Shoreland —					51		Present?				
		s Property/Land within 1000) feet of La		Distance St	feet	≱Yes				
				If yescontinue -				∑∕No	□ No		
☐ Non-Shoreland											
Value at Time									Located in		
of Completion	1	Project			Туре	Length	Width	Height	Town of		
* include donated time		(What are you applying for)			Type	Length		i i cigire	Bayfield		
& material			56.						☐ Yes		
		On-Premise	New	□ 1 ·	Sided				TBA is		
\$		Off-Premise	☐ Repla	cement 1/2-	Sided	20'	1,5'	12'	required		
<u> 21,000</u>				□ 0	n-Building				No		
·											
		544445550 0054		CTARTING CONCERNICTION		ALT WALL BEST IT IN E	EN ALTIES		•		
I (we) declare that this	s applicat	ion (including any accompanying info		or STARTING CONSTRUCTION een examined by me (us) and to the				omplete. I (we) acknowle	edge that I (we)		
		tail and accuracy of all information I unty relying on this information I (w									
		y reasonable time for the purpose of		oviding in or with this application.	(we) consent to co	On I :		t	/		
Owner(s):	Pa	rass The	Pa	ind Vota	PANS	Park	TNC Da	te 8/20	118		
	Itiple O	wners listed on the Deed All C	wners mus	t sign <u>or</u> letter(s) of authoriza	tion must accor	npany this application	on)		1-0		
Applicant(s):			_				Da	te			
		fyou are applying for an nee	romico cio	n: the property owners must	alco cign this fo	orm)					
		f you are applying for an Off-	oremise sig	n; the property owners must	also sign this fo	orm)		0 /	1		
Authorized Ager	(1	f you are applying for an Off -	oremise sig	Snilsto	eir	La province	Da	te 8/20	118		
	(I nt:		the owner(s	Snilsto	eir	La province	Da	te <u>8/20</u>	118		
Authorized Ager	(I nt:(I	f you are signing on behalf of	S.	Snilsto	eir	La province	Da	te 8/20	118		
	(I nt:(I	f you are signing on behalf of	S.	Snilsto	eir	this application)		Attach Copy of Tax Statemer			

se sign location

3. Show dimensions in feet on the following:

IMPORTANT
Detailed Plot Plan <u>is Neccessary</u>

Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement		
Setback from the Centerline of Platted Road	&3 Feet	Setback from the North Lot Line	.35 Fee		
Setback from the Established Right-of-Way	A/A Feet	Setback from the South Lot Line	LILI Fee		
		Setback from the West Lot Line	Fee		
Setback from Lake, River, Stream or Pond	6つの Feet	Setback from the East Lot Line	6 6 Fee		
Setback from Other Sign(s)	NA Feet		6 65 100		
		NI (1)	,		

Sign Plan (Fill in Information Desired on Sign)

(see attached picture)

Issuance Information (County Use Only)	Permit Number:	2-0335	Permit Date:	8-20-18			
Permit Denied (Date):	Reason for Denial:		007-70				
Granted by Variance (B.O.A.) ☐ Yes 1 No Case #:) A	Previously Grante ☐ Yes	ed by Variance (B.O.A.) Case	.#: NA			
Was Parcel Legally Created Was Proposed Building Site Delineated Wes ✓ Yes	v No	Were Property	Lines Represented by Owner Was Property Surveyed	Yes No			
Inspection Record: 5:4e i Subsack	Zoning District (F\)						
Date of Inspection: 8 22 2018	Date of Re-Inspection:						
Condition(s): Town, Committee or Board Condition	Attached?	If <u>No</u> they need to be	attached.)				
Must maintain Se	Place S						
Signature of Inspector:				Date of Approval 24 18			

May Also Be Required

JOUSE - X
JANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No. 18-0335			Issued To: Across the Pond Veterans Park / Ja						ark / Jan	e Sı	nilsbe	erg, Agent	:			
Location:		1/4	of	_	1/4	Section	12	Township	47	N.	Range	9	W.	Town of	Hughes	
Gov't Lot			l	_ot 1		Blo	Block Subdivision				CSM# 2019					

For: Commercial Other: [On – Premise; Sign (20' x 1.5' x 12 high)]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must maintain setbacks

NOTE:

This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

August 29, 2018